



Town of Hopkinton

330 Main Street • Hopkinton, New Hampshire 03229 • www.hopkinton-nh.gov

Tel: 603-746-3170

Fax: 603-746-3049

MECHANICAL PERMIT APPLICATION

Street Address:		Work Type:		
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Other _____				
Business Name:		Property Owner's Name:		
Mailing Address:		Mailing Address:		
City/State/Zip:		City/State/Zip:		
Phone (days):		Phone (days):		
Email:		Email:		
Gas License #				
Contractor's Signature:				
Print Name:				
Work Type	Fee	Items	Total	
Gas Piping	35.00	-		
Gas Appliances, each	10.00			
Heating Equipment (includes ductwork and piping) Note: Complete reverse side for oil burner	55.00			
Cooling Equipment (includes ductwork and piping)	55.00			
Refrigeration (commercial)	55.00			
Storage Tank of Flammable Liquid	43.00			
Retail Cylinder Exchange	35.00			
Heating/Cooling Split Unit	38.00			
Hot Water Tank (gas or oil)	14.00			
Chimney per 10' or part of	21.00			
Backflow Preventers	19.00			
Fireplace, includes inserts	38.00			
Manufactured Housing	81.00			
Application Fee, Non-Refundable	30.00			
			Total	

Please include a copy of Gas License or Corporate License.

Re-inspection Fee (failure to pass inspection, not ready for inspection, or premises was not accessible) \$45.00

Schedule Inspections: Call Planning/Building Office at (603) 746-8243 or email planzone@hopkinton-nh.gov

Questions: Call Building Inspector at (603) 783-1509 or email buildinginspector@hopkinton-nh.gov



Jeffrey Yale, Fire Chief

Hopkinton Fire Department

9 Pine Street, Hopkinton, NH 03229

o. 603.746.3181 | c. 603.731.9034 | f. 603.746.5134

www.hopkinton-nh.gov | firechief@hopkinton-nh.gov

PERMIT TO INSTALL AND OPERATE OIL BURNING EQUIPMENT

The undersigned hereby applies for a permit to install and operate oil burning equipment in compliance with RSA 153:5 and NFPA Standard #31 as follows:

Address:	
Type of Occupancy:	
Make & Serial # of Oil Burner:	
Size & Location of Tank:	
Owner:	
Mailing Address:	
Phone (days):	
Occupant's Name:	
Name of Installer:	
Business Name:	
Mailing Address:	
Phone:	
Signature of Owner or Installer:	Date:

Schedule Inspections: Hopkinton Fire Department contact information listed above.

When signed below by the Fire Chief or Designee, permission is hereby granted to operate the oil burning equipment described above which has been inspected and found to be in compliance with the State Fire Code as adopted by the State Fire Marshal.

Date

Signature of Fire Chief or Designee

Copies: Original posted near burner
Fire Department
Installer